



RCE 7287/423/RCE 4/29/03 D.RELL

**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

<i>Application Number</i>	09/068,052
<i>Filing Date</i>	April 29, 1998
<i>First Named Inventor</i>	Kiyotaka Koide
<i>Art Unit</i>	2871
<i>Examiner Name</i>	Toan Ton
<i>Attorney Docket Number</i>	9319S-000063

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1.	Submission required under 37 C.F.R. 1.114		
a.	<input checked="" type="checkbox"/> Previously submitted <ul style="list-style-type: none"> i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 C.F.R. 1.116 previously filed on <u>January 31, 2003</u> (Any unentered amendment(s) referred to above will be entered). ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____ iii. <input type="checkbox"/> Other _____ 		
b.	Enclosed <ul style="list-style-type: none"> i. <input type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) iii. <input type="checkbox"/> Information Disclosure Statement (IDS) iv. <input checked="" type="checkbox"/> Other <u>Petition for Extension of Time</u> 		
2.	Miscellaneous		
a.	<input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(i) required)		
b.	<input type="checkbox"/> Other _____		
3.	Fees The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.		
a.	<input checked="" type="checkbox"/> The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. <u>08-0750</u> <ul style="list-style-type: none"> i. <input type="checkbox"/> RCE fee required under 37 C.F.R. 1.17(e) ii. <input type="checkbox"/> Extension of time fee (37 C.F.R. 1.136 and 1.17) iii. <input checked="" type="checkbox"/> Other <u>Any deficiency for a fee required under 37 CFR 1.16 or 1.17.</u> 		
b.	<input checked="" type="checkbox"/> Check in the amount of \$ <u>1680</u> enclosed		
c.	<input type="checkbox"/> Payment by credit card (Form PTO-2038 enclosed)		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print /Type)	G. Gregory Schivley Bryant E. Wade	Registration No. (Attorney/Agent)	27,382 40,344
Signature	<i>G. Gregory Schivley / Bryant E. Wade</i>		
	Date	<i>April 17, 2003</i>	

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

Name (Print /Type)	G. Gregory Schivley / Bryant E. Wade		
Signature	<i>G. Gregory Schivley / Bryant E. Wade</i>		
	Date	<i>April 17, 2003</i>	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 1680)*Complete if Known*

Application Number	09/068,052
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Examiner Name	Toan Ton
Group / Art Unit	2871
Attorney Docket No.	9319S-000063

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Other None
Order

 Deposit Account:Deposit
Account
Number

08-0750

Deposit
Account
Name

Harness, Dickey & Pierce, P.L.C.

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee
 to the above-identified deposit account.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	410	2252	205
1253	930	2253	465
1254	1,450	2254	725
1255	1,970	2255	985
1401	320	2401	160
1402	320	2402	160
1403	280	2403	140
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,300	2453	650
1501	1,300	2501	650
1502	470	2502	235
1503	630	2503	315
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	750	2809	375
1810	750	2810	375
1801	750	2801	375
1802	900	1802	900

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FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	750	2001	375
1002	330	2002	165
1003	520	2003	260
1004	750	2004	375
1005	160	2005	80

SUBTOTAL (1) (\$ 0)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20 **	= 0	X = 0
Independent Claims	-3 **	= 0	X = 0
Multiple Dependent		X = 0	

Large Entity

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	18	2202	9
1201	84	2201	42
1203	280	2203	140
1204	84	2204	42
1205	18	2205	9

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater; For Reissues, see above

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 1680)

SUBMITTED BY		<i>Complete if applicable</i>		
Name (Print/Type)	G. Gregory Schieler Bryant E. Wade	Registration No./Attorney/Agent	27,382 40,344	Telephone
Signature	<i>[Signature]</i>		Date	April 17, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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